

CITY OF  
**COOKEVILLE**  
TENNESSEE  
Department of Water Quality Control

May 14, 2013

WTP NOI  
Division of Water Pollution Control  
6<sup>th</sup> Floor L & C Annex, 401 Church Street  
Nashville, Tennessee 37243

Re: Cookeville Water Treatment Plant  
NOI , Presently Covered by NPDES Permit # TN0005231

To whom it may concern:

Please find enclosed the original and one copy of the NOI for coverage under the General Permit Water Treatment Plant Discharge for the discharge from the Cookeville Water Treatment Plant Lagoon Discharge.

If you have any questions regarding this matter, feel free to call me at (931) 520-5258.

Sincerely,



Barry K. Turner, P.E.  
Environmental Engineer

Enclosures

**RECEIVED**  
MAY 15 2013  
TN Division Of Water  
Pollution Control



DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER POLLUTION CONTROL

**NOTICE OF INTENT (NOI)**  
**WATER TREATMENT PLANT DISCHARGE PERMIT**

|  |  |
|--|--|
| Facility Name: CITY OF COOKEVILLE WATER TREATMENT PLANT  | County: PUTNAM                             |
| Street Address<br>or Location: 9722 WATER PLANT ROAD - BAXTER, TN 38544  | Latitude: 36°4'32"<br>Longitude: 85°40'41" |
| ▪ All entries must be in ink. ▪ Attach a copy of U.S.G.S. topographical map, a city map, or a county map, identifying the location of this facility. ▪ This NOI must be signed by a responsible corporate officer for a corporation, a general partner for a partnership, the proprietor for a sole proprietorship, or a principal executive officer or ranking elected official for a public agency. ▪ If this NOI is submitted because of new operator or to update facility information (such as name of facility, new official contact person name, new E-mail address, etc.), provide the existing permit tracking number: <u>TN0005231</u> |  |

|   |
|---|
| Owner or Operator: (the person or legal entity which controls facility's operation; this may or may not be the same as the site name or the official contact name)<br><b>CITY OF COOKEVILLE DEPARTMENT OF WATER QUALITY CONTROL</b> |
|---|

|   |  |   |                     |                      |
|---|--|---|---------------------|----------------------|
| ① | Official Contact Person Name: (individual responsible for a facility)<br><b>RONNIE KELLY</b> | Title or Position:<br><b>DIRECTOR DEPT OF WATER QUALITY CONTROL</b> |                     |                      |
|   | Mailing Address:<br><b>1860 S JEFFERSON AVE</b>  | City:<br><b>COOKEVILLE</b>  | State:<br><b>TN</b> | Zip:<br><b>38506</b> |
|   | Phone:<br><b>(931) 520-5227</b>  | E-mail:<br><b>RJK@COOKEVILLE-TN.ORG</b>                             |                     |                      |

|   |   |   |                     |                      |
|---|---|---|---------------------|----------------------|
| 2 | Local Contact Person Name: (if appropriate, write "same as #1")<br><b>RODGER PHILLIPS</b>             | Title or Position:<br><b>WTP SUPERINTENDENT</b> |                     |                      |
|   | Facility Address: (this may or may not be the same as street address)<br><b>9722 WATER PLANT ROAD</b> | Facility City:<br><b>BAXTER</b>                 | State:<br><b>TN</b> | Zip:<br><b>38544</b> |
|   | Phone:<br><b>(931) 858-2646</b>   | E-mail:<br><b>WATERPLANT@COOKEVILLE-TN.ORG</b>  |                     |                      |

Write in the box (to the right) or circle the number (above) to indicate where to send correspondence: **1**

**PROCESS DESCRIPTION (Reply on a separate page, if necessary)**

|   |
|---|
| Name of surface waters receiving the discharge (and the mileage point, if available).<br><b>CENTER HILL LAKE-DITCH @0.1 TO ALUM LICK BRANCH @ MILE 1.0 TO MINE LICK CREEK @ MILE 4.2</b>  |
| A description of the plant, i.e. iron removal, manganese and/or turbidity removal, and a list of any additives used in the water treatment process, such as coagulant, oxidizing enhancers, etc.<br><b>CONVENTIONAL A WATER PLANT USING FERRIC CHLORIDE AS THE COAGULANT.</b>   |
| Design capacity of treatment plant in million of gallons per day (MGD): <u>15</u> Number and volume of sedimentation basins: <u>4 - 312,000 GALLONS EACH</u><br>Average flow of finished water production in MGD over 12 months prior to submission of the NOI: <u>9.4 MGD</u>  |
| Filter backwashing. Number of filter backwashed: <u>8</u> Frequency for each filter: <u>1.8</u> times per week. Amount of water used to backwash: <u>280,000</u> for each filter. Frequency sedimentation basin is washed out: <u>2</u> times per year. Amount of water used to wash out the largest sedimentation basin <u>20,000</u> gallons. Type of treatment provided for backwash and sedimentation basin washwaters and the design capacity of the treatment system. |
| Water is released from the backwash settling basin <u>      </u> times per week for <u>      </u> hours per release and a volume of <u>      </u> gallons per release. For existing facility, give averages from last 12 months of operation. For new facilities, indicate "not available". Describe more fully, if necessary.<br><b>CONTINUOUS</b>   |

**CERTIFICATION AND SIGNATURE**

|   |                                   |               |                        |
|---|-----------------------------------|---------------|------------------------|
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. |                                   |               |                        |
| <b>RONNIE KELLY</b><br>Printed Name   | <b>DIRECTOR</b><br>Official Title | <br>Signature | <b>5/10/13</b><br>Date |

**STATE USE ONLY**

|                           |                           |                           |              |          |
|---------------------------|---------------------------|---------------------------|--------------|----------|
| Received Date             | Domestic Water Supply Use | Protective for Lead Conc. | Tracking No. | EAC      |
| Impaired Receiving Stream | High Quality Water        | T & E Aquatic Fauna       | NOC Date     | Reviewer |

Submit the original completed and signed form to:

**RECEIVED**

**MAY 15 2013**

**WTP NOI**  
**Division of Water Pollution Control**  
**6<sup>th</sup> Floor L&C Annex, 401 Church Street**  
**Nashville, TN 37243-1534**